



MAIL STOP AF
AMENDMENT UNDER 37 CFR 1.116
EXPEDITED PROCEDURE
GROUP ART UNIT 2624

03500.014985

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
	:	Examiner: G. Garcia
NORIKO KAWASAKI, ET AL.)	
	:	Group Art Unit: 2624
Appln. No.: 09/730,574)	
	:	
Filed: December 7, 2000)	
	:	
For: CARRIAGE SCANNING)	
APPARATUS (AS AMENDED)	:	July 20, 2005

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AFTER FINAL REJECTION

Sir:

Introductory Comments

In response to the Official Action mailed May 20, 2005, the Examiner is respectfully requested to amend the above-identified application as follows.



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Docket No.: 03500.014985

NORIKO KAWASAKI, ET AL.

Application No.: 09/730,574

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For: CARRIAGE SCANNING APPARATUS
(AS AMENDED)

Date: July 20, 2005

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Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment After Final Rejection in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	14	MINUS	54	= 0	x \$25 \$50	\$0.00
INDEP. CLAIMS	1	MINUS	3	= 0	x \$100 \$200	\$0.00
Fee for Multiple Dependent claims \$180°/\$360						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0.00

☐ °Verified Statement claiming small entity status is enclosed, if not filed previously.

☐ A check in the amount of \$____ is enclosed.

☐ Charge \$____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205.

☐ A check in the amount of \$____ to cover the fee for a ____ month extension is enclosed.

☐ A check in the amount of \$____ to cover the Information Disclosure Statement fee is enclosed.

☒ Applicants' undersigned attorney may be reached in our Washington, D.C. office by telephone at (202) 530-1010. All correspondence should continue to be directed to our below-listed address.

Respectfully submitted,



Mark A. Williamson
Attorney for Applicants
Registration No. 33,628

FITZPATRICK, CELLA, HARPER & SCINTO
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